



New System Demo and Program Overview June 26, 2019

PRESENTATION BY

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**Indiana Department of
Workforce Development**


Presentation Overview

- ❖ User Accounts
- ❖ Application Annual Review
- ❖ Annual Federal Program Data Reporting
- ❖ System Demo
- ❖ Important Dates and Reminders

User Accounts

- All users must create a new INTraining account.
- An [Access Indiana](#) account will also need to be created, prior to logging into INTraining.
 - The same email for [Access Indiana](#) and INTraining must be used.
- Training providers will now be able to manage user accounts.

Update Your User Account

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INTraining

Create a Training Provider User Account
Log In with an Existing Account

Welcome to INTraining, your source of information on training that could lead to a new or more rewarding career.

INTraining presents a broad and diverse selection of occupational training choices to support the employment goals of Indiana's workforce. Training providers that meet the requirements of the Workforce Innovation and Opportunity Act (WIOA) and Indiana state policy are eligible for funding through the local WorkOne office.

These training providers are indicated with the following icons:

-  Funded only in certain areas
-  Funded statewide

INTraining allows you to search by provider, location or program to help you find the educational program that best suits your needs. Begin your search by using the filter criteria below.

Search Programs

Search Options

Search by Main Program ID

Main Program ID

Provider Name

Provider Name

Show entries

Programs




(GMAW) MIG & FLUX CORED Combination Welding

#8653

Knight School Of Welding

Louisville, Kentucky (Jefferson County)

Industry-Recognized Certification

American Welding Society Certificate

4600.00

Staff Approved

Update Your User Account

INTraining



Welcome to Indiana Department of Workforce Development's INTraining system. Training providers, DWD staff, and Regional WorkOne staff can use the Access Indiana link below to create accounts or log in. If you currently use Indiana's INBiz system, your username and password will be the same. If you have questions, please contact INTraining@dwd.in.gov.

[ACCESS INDIANA >](#)

Welcome to The State of Indiana

Sign In

Email Address

Password [Forgot your password?](#)

Sign in

Don't have an account? [Sign up now](#)

[Need Help?](#)

If you have an INBiz account with the Secretary of State, enter your email address and password. If not, click Sign up now.

Step 1

Welcome to The State of Indiana

Step 1

You must verify your Email Address first. Enter your Email Address and click to have the verification code sent to your Email. Once you receive your code, enter it in the field and complete the form to create your account. Please do not close or leave this page until you verify your code. On a new browser session or a new verification code.

Email Address

Please enter a valid email address

TestingProvider2019@gmail.com

Send verification code

[Need Help?](#)

Step 2

password

rs, containing 3 out of 4 of the following: Lowercase characters, uppercase characters, digits (0-9), and one or more of the following symbols: @ # \$ % ^ & * _ + = [] { } | \ : ' ? / ' - "

Password

8-16 characters, containing 3 out of 4 of the following: Lowercase characters, uppercase characters, digits [0-9], and one or more of the following symbols: @ # \$ % ^ & * _ + = [] { } | \ : ' , ? / ' - =

Confirm New Password

First Name

This information is required

Middle Initial

Last Name

This information is required

Phone Number

Phone Number

Can

Step 1

State of Indiana (B2C UAT) account email verification code Inbox x



State of Indiana (B2C UAT) <no-reply@in.gov>
to TestingProvider2019 ▾

Verify your email address

Thanks for verifying your TestingProvider2019@gmail.com account!

Your code is 268693

Sincerely,
State of Indiana (B2C UAT)

This message was sent from an unmonitored email address.
Please do not reply to this message.



Step 1


You must verify your Email Address first. Enter your Email Address and click to have the verification code sent to your Email. Once you receive your code via Email, enter it in the appropriate field and complete the form to create your account. Please do not close or leave this page until you verify your code. Open a new browser session or Tab to check your email for the verification code.

Email Address

Please enter a valid email address.

Verification code

Enter your
verification
code



Verify code

Send new code

Step 2

Welcome to The State of Indiana

Step 1

You must verify your Email Address first. Enter your Email Address and click to have the verification code sent to your Email. Once you receive your code via Email, enter it in the appropriate field and complete the form to create your account. Please do not close or leave this page until you verify your code. Open a new browser session or Tab to check your email for the verification code.

Email Address

Please enter a valid email address.

TestingProvider2019@gmail.com

Send verification code

Complete step 2
by creating your
password and
basic
information.

Step 2

Create New Password

8-16 characters, containing 3 out of 4 of the following: Lowercase characters, uppercase characters, digits (0-9), and one or more of the following symbols: @ # \$ % ^ & * _ + = [] { } | \ : ' , ? / ' - * () ; . ,

Confirm New Password

8-16 characters, containing 3 out of 4 of the following: Lowercase characters, uppercase characters, digits (0-9), and one or more of the following symbols: @ # \$ % ^ & * _ + = [] { } | \ : ' , ? / ' - * () ; . ,

Confirm New Password

First Name

This information is required.

First Name

Middle Initial

Middle Initial

Last Name

This information is required.

Last Name

Phone Number

Phone Number

Create

Cancel

Provider Dashboard

HOME

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Provider

Sample Test Institution

Federal Reporting is due by July 31, 2019. See your program list below for any reporting due.

Provider ID: 2744

Inactive/Pending

Provider Information	
FEIN:	123457698

[Sent Email Notifications →](#)

Provider Action Needed	
INFORMATION REQUESTED	
Program Location: Home Health Aide (ProgramLocation)	
Program Location ID: 10000592	
Provider Location: Indianapolis Campus Indianapolis, Indiana (Marion)	
Comments: Please check your CIP code. It does not match your program. View Details	

Users							Add User
First Name	Last Name	Phone Number	Email	Enabled	Role	Edit User	
Sample	Test	(123) 456-7899	test@institutionl.com	✓	Training Provider	Edit	
Testing	Provicer	(317) 222-2222	TestingProvider2019@gmail.com	✓	Training Provider Admin	Edit	
Mary	Provider	(317) 555-5555	Maryprovider@email.com	✓		Edit	
Mary	Provider	(317) 555-5555	Maryprovider@email.com	✓	Training Provider Admin	Edit	
Mike	Provider	(125) 444-5555	Mike@email.com	✓	Training Provider	Edit	

Provider Locations					Add Location
Location ID	Provider Location Name	Status	Address	City	
3105	Indianapolis Campus	Staff Approved	125 Main Street	Indianapolis	
10000283	Anderson Campus	Pending Staff Review	125 Main Street	Anderson	
10000285	Fort Wayne Campus	Pending Staff Review	124 Main St	Fort Wayne	

Programs			Add Program
Show 10 entries			
Main Program ID	Title Of Training	Federal Notification	
5899	Certified Nursing Assistant Training	Federal Reporting Due	
5753	accounting	Federal Reporting Due	
10001061	Welding		
10001060	Home Health Aide		

Showing 1 to 4 of 4 entries

Previous

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Next

System Structure

Provider:
ABC Training

Provider Location:
ABC Training
Anderson

Provider Location:
ABC Training Muncie

Main Program:
Accounting

Program Location:
Accounting at ABC
Training Anderson

Program Location:
Accounting at ABC
Training Muncie



Application Annual Review

- All **approved provider location and program applications** will be subject to an **annual review**.
- This review will begin one year from the initial application approval date, and every year thereafter the application is in approval status.
- Any application that is not reviewed and confirmed by the Annual Review due date, will be removed from the INTraining list.
- Any application that is not reviewed and confirmed within 60 days of the Annual Review due date will be terminated.

Annual Federal Program Data Reporting

- Program year runs from July 1st to June 30th.
- Data reporting is open during the program year, and from July 1st to July 31st of the new program year.
- Program data should be reported after each cohort.
- Program data **MUST** be submitted by July 31st of every program year.
- Data waivers are no longer accepted.
- Every program **MUST** submit data.
 - Data is to be reported on any student, regardless of funding source, that enrolls and starts in the associated program.
- Training Providers will be asked to review and confirm the enrollment status for all students who are still appearing as enrolled past the length of the program.
- Any program that does not submit data by **END OF DAY July 31st** will be placed in a Pending Data status on August 1st, and program funding will be suspended for 6 months.
- To be eligible to receive funding again, the program must submit the required data within the 6 month suspension timeframe.

Federal Reporting

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Provider

Sample Test Institution

Federal Reporting is due by July 31, 2019. See your program list below for any reporting due.

Provider ID: 2744

Inactive/Pending

Provider Information

FEIN: 123457698

[Sent Email Notifications →](#)

Provider Action Needed

INFORMATION REQUESTED

Program Location:

Home Health Aide (ProgramLocation)

Program Location ID:

10000592

Provider Location:

Indianapolis Campus
Indianapolis, Indiana (Marion)

Comments:

Please check your CIP code. It does not match your program.

[View Details](#)

Users

[Add User](#)

First Name	Last Name	Phone Number	Email	Enabled	Role	Edit User
Sample	Test	(123) 456-7899	test@institutionl.com	✓	Training Provider	Edit
Testing	Provicer	(317) 222-2222	TestingProvider2019@gmail.com	✓	Training Provider Admin	Edit
Mary	Provider	(317) 555-5555	Maryprovider@email.com	✓		Edit
Mary	Provider	(317) 555-5555	Maryprovider@email.com	✓	Training Provider Admin	Edit
Mike	Provider	(125) 444-5555	Mike@email.com	✓	Training Provider	Edit

Provider Locations

[Add Location](#)

Location ID	Provider Location Name	Status	Address	City
3105	Indianapolis Campus	Staff Approved	125 Main Street	Indianapolis
10000283	Anderson Campus	Pending Staff Review	125 Main Street	Anderson
10000285	Fort Wayne Campus	Pending Staff Review	124 Main St	Fort Wayne

Programs

[Add Program](#)

Show entries

Main Program ID	Title Of Training	Federal Notification
5899	Certified Nursing Assistant Training	Federal Reporting Due
5753	accounting	Federal Reporting Due
10001061	Welding	
10001060	Home Health Aide	

Showing 1 to 4 of 4 entries

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[Next](#)

Federal Reporting

Program

Certified Nursing Assistant Training

Program Locations highlighted below require federal reporting of student data.

Main Program ID: 5899 Active

ENABLE EDITING

Provider Information

Name:
Sample Test Institution

FEIN: 123457698

Status:

Program Locations						
Location ID	Status	Program Location	Address	City	Zip	Federal Reporting
11059	Staff Approved	Certified Nursing Assistant Training Indianapolis Campus	125 Main Street	Indianapolis	46214	Federal Reporting Due

Federal Reporting

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Indianapolis Campus / Certified Nursing Assistant Training / Indianapolis Campus

Program Location

Program Location ID: 11059 Staff Approved

Program Name: Certified Nursing Assistant Training

Provider Location: Indianapolis Campus

This program location requires federal reporting of student data.

Provider Information

Name:
Sample Test Institution

FEIN: 123457698

Status: Inactive/Pending

Provider Location

Address:
125 Main Street
Indianapolis, IN 46214

Status: Staff Approved

Details

Course Curriculum

Student Data

Summary Credentials Related Occupations Performance Waiver Funding Student Data **Federal Reporting** Apprenticeship

Federal Reporting

Add Student






Please edit the student info on all the students highlighted in red and make sure you verify the enrollment status!

Search:

First Name	Last Name	DOB	Entry Year	Entry Date	Completion Date	Enrollment Status	Complete	Assessment	Assessment Info	Student Info	Delete
Aaron	Anderson	03/06/2010	2019	6/12/2019	6/17/2019	Completed program	YES		Assessment	Edit	
Aaron	Applegate	01/01/1972	2019	6/18/2019		Completed program	YES		Assessment	Edit	
Amanda	Alan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Amanda	Alexander	06/11/2019	2019	6/17/2019		Completed program	YES		Assessment	Edit	
Amilia	Alan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Ananda	Mulligan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Anderson	Alan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Andrew	Anderson	06/11/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Aravanan	Murugan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled			Assessment	Edit	
Bob	Smith	06/22/1972	2019	5/6/2019		Currently Enrolled			Assessment	Edit	

Please edit all highlighted students to confirm their enrollment status

Federal Reporting

Anderson	Alan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled		Assessment	Edit	
Andrew	Anderson	06/11/2019	2019	6/4/2019	6/24/2019	Dropped	NO	Assessment	Edit	
Aravanan	Murugan	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled		Assessment	Edit	
Bob	Smith	06/23/1972	2019	5/6/2019		Currently Enrolled		Assessment	Edit	
John	Miller	06/17/2019	2018	3/6/2018		Completed program	YES	Assessment	Edit	
Mary	Jones	05/19/1985	2019	6/18/2019		Completed program	YES	Assessment	Edit	
Presley	Jenson	06/17/2019	2019	6/17/2019	6/19/2019	Currently Enrolled		Assessment	Edit	

Showing 1 to 13 of 13 entries

☒ I hereby certify, as an authorized representative of the said training institution, that the above statements and all information are accurate and true. False statements will deem my organization ineligible to provide services under Section 122 of the Workforce Innovation and Opportunity Act of 2014.

SUBMIT FEDERAL REPORTING

Once you have confirmed all highlighted students, submit the data for federal reporting.

System Demo

Important Dates and Reminders

➤ General Changes:

07/01/19

- New INTraining system will be live.
- User accounts can be created.
- Occupational flame ranking will be updated within INTraining.
- All data waivers will expire, and new data waivers will not be accepted.

➤ Federal Reporting:

07/01/19 - 07/31/19

- Annual Federal Program Data Reporting begins.
 - ALL training providers MUST review, confirm, and submit program year data for EACH PROGRAM.

08/01/19

- Annual Federal Program Data Reporting closes.
 - Any program that does not have data reported will be placed into “Pending Data” status, and will begin its 6 month unfunded suspension status.

02/01/20

- Any program still in “Pending Data” status will be terminated.
- Any program that was moved into “Pending Data” status on 08/01/19, and has since submitted data during the 6 month suspension will be re-evaluated for fundable status.

➤ Annual Review:

08/01/19

- Application Annual Review will be implemented.
 - Individual training providers will be email 60 and 30 days prior to their applications' unique due date.



Questions?

INTraining@dwd.in.gov

INTrainingDWD.org